Approved for use through 7/31/2006. OMB 0651-0032
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o a collection of information unless it displays a valid OMB control number.

| PATEN | Appliestion or Docket Number | | | | | | | | | | |
|--|--|---|--|--------------------------|--------------------|-----------------------|--|--|--|--|--|
| APP | LICATION AS FILED (Column 1) | – PART I (Column 2) | SMALL ENTITY | OR | | THER THAN MALL ENTITY | | | | | |
| FOR | NUMBER FILED | NUMBER EXTRA | RATE (\$) FEE (\$) | | RATE (\$) | FEE (\$) | | | | | |
| BASIC FEE (37 CFR 1.16(a), (b), or (c)) | | | 395 | | | 990 | | | | | |
| SEARCH FEE | | | | | | 1 | | | | | |
| (37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE | | | | | ļ | | | | | | |
| (37 CFR 1.16(o), (p), or (q)) | - | · | | | | i | | | | | |
| TOTAL CLAIMS (37 CFR 1.16(i)) | minus 20 = |]• | x∂22€ | OR | ×50 = | | | | | | |
| INDEPENDENT CLAIMS (37 CFR 1.16(h)) | minus 3 = | | ×100 | | (and | _ | | | | | |
| (67 67 10 11.10(11)) | If the specification an | d drawings exceed 100 | | | | <u> </u> | | | | | |
| APPLICATION SIZE ' | Is \$250 (\$125 for small | pplication size fee due | | | | | | | | | |
| (37 CFR 1.16(s)) | additional 50 sheets- | intraction the mount of the second | com to the Landon state of the control of the contr | . १९५५ <mark>स्टा</mark> | her same | Property and the | | | | | |
| | 35 U.S.C. 41(a)(1)(G) | and 37 CFR 1.16(s). | 100 | | 210 | | | | | | |
| MULTIPLE DEPENDENT | <u> 300</u> | <u> </u> | | | | | | | | | |
| * If the difference in colum | nn 1 is less than zero, enter | '0" in column 2. | TOTAL | | TOTAL | | | | | | |
| APPLICA | ATION AS AMENDED | - PART II | • | | | | | | | | |
| 11/21/05 | Column 1) | (Column 2) (Column 3) | OHALL CUTTO | OR | OTHER | | | | | | |
| | | HIGHEST COMMIN 3) | SMALL ENTITY | | SMALL | ENTITY | | | | | |
| | EMAINING. AFTER PF | NUMBER PRESENT REVIOUSLY EXTRA PAID FOR | RATE (\$) ADDI- TIONAL | | RATE (\$) | ADDI- TIONAL | | | | | |
| Total (37 CFR 1.18(h)) O | Minus " | 30 = | 7 FEE (\$) | | 、よつ・ | FEE (\$) • | | | | | |
| Independent • | Minus *** | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 100 | OR | 200 | | | | | | |
| Z (37 CFR 1.16(h)) Application Size Fe | e (37 CFR 1 16(s)) | <u> </u> | | OR | ØUU= | | | | | | |
| 7 | ON OF MULTIPLE DEPENDENT | CLAIM (27.058 1.16(N) | 190 | | 340 | | | | | | |
| THOTTKEOETTATIO | | COAR (STORK I. IO()) | TOTAL | OR | TOTAL | | | | | | |
| • | | | ADD'L FEE | OR | ADD'L FEE | | | | | | |
| | Column 1) | (Column 2) (Column 3) | | | | | | | | | |
| | | HIGHEST NUMBER PRESENT | RATE (\$) ADDI- | | RATE (\$) | ADDI- | | | | | |
| <u></u> | | REVIOUSLY EXTRA | TIONAL FEE (\$) | , | | TIONAL FEE (\$) | | | | | |
| Ⅲ Total • (37 CFR 1.166)) | Minus ** | = | 1 25 | 0.0 | ×5O= | | | | | | |
| | Minus *** | = | | OR | 30 | · | | | | | |
| Independent (37 CFR 1.16(h)) Application Size Ference | e (37 CFR 1.16(s)) | | | · OR | au | | | | | | |
| | N OF MULTIPLE DEPENDENT (| CLAIM (37 CFR 1.16(j)) |)80 | OR | 360 | | | | | | |
| | | | TOTAL ADD'L FEE | OR | TOTAL ADD'L FEE | | | | | | |
| • If the entry in colum | • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | |
| *** If the "Highest Num *** If the "Highest Num! | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". | | | | | | | | | | |
| The "Highest Number | er Previously Paid For (Tota | or Independent) is the high | est number found in the appropriate | box in c | olumn 1. | | | | | | |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

| PATENT APPLICATION FEE DETERMINATION RECO | | | | | | | | | A | bbiicano | u orī | Pocket Nut | uper | | | |
|---|--|---|--------------------------------|------------------------------------|--------------|------------------|----------|--------------------|------|------------------------|----------|---------------------|------------------------|--|--|--|
| | Effective October 1, 2003 | | | | | | | | | 10767177 | | | | | | |
| | CLAIMS AS FILED - PART (Column 2) | | | | | | | SMALL TYPE | EN. | VIIIY | OR | OTHE | R THAN ENTITY | | | |
| Ţ | OTAL CLAIMS | S | 39 | 39 | | | | RATE | | . FEE | ٦. | RATE | FEE | | | |
| F | OR | | NUMBE | R FILED | NUM | BER EXTRA | • | BASIC F | EE | 385.00 | OR | BASIC FEE | 770.00 | | | |
| T | OTAL CHARGE | ABLE CLAIMS | 39 minus 20= * | | | 19 | | XS 9- | | 121 | OR | X\$18= | | | | |
| IN | DEPENDENT C | CLAIMS | 4 minus 3 = 1 | | | | | X43= | | 43 | OR | X86= | • • | | | |
| M | ULTIPLE DEPE | NDENT CLAIM F | RESENT | | | | | +145= | | | OR | +290= | · | | | |
| | | e in column 1 is | less than a | tero, enter | *0" in | column 2 | į | TOTA | | 599 | OR | TOTAL | | | | |
| 3 | 14/05 | CLAIMS AS | AMENDE | | | | | | | | . | OTHER | | | | |
| ř | 1 1 | (Column 1) | | (Colum | | (Column 3) | 1 7 | SMAL | LE | | OR | SMALL | | | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUME PREVIO PAID I | BEA HUSLY | PRESENT EXTRA | | RATE | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | | |
| 夏 | Total | | | 39 | • — | | X\$ 9= | | - | ОЯ | X\$18= | | | | | |
| AME | independent | • 4 | Minus | Minus 4 | | | | X43= | | | OR | X86= | | | | |
| <u> </u> | Trino, rheo | ENTAINOR OF RE | OLIWIE DE | PERDENT | CORIN | | | +145= | | | OR | +290= | | | | |
| | • | | • | , . | | • | | TOTA | | _ | OR | YOTAL ADDIT FEE | | | | |
| | | (Column 1) | | (Colum | ın 2) | (Column 3) | | | | | | | | | | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | • | HIGHE NUMB PREVIOU PAID F | IER USLY | PRESENT EXTRA | | RATE | - 8 | ADDI- TONAL FEE | | RATE | ADDI- TIONAL FEE | | | |
| AMENDMENT | Total | • | Minus | - | • | • | | X\$ 9= | T | | OR | X\$18= | | | | |
| AME | Independent | NTATION OF MI | Minus | en en | C1 404 | | ľ | X43= | 1 | | OR | X86= | | | | |
| نــا | FINGT PRESE | STATION OF ME | ALTIPLE DE | · | CLAIM | _ : [_] _] | | +145= | 1 | | OR | +290= | | | | |
| | | | | | | | - | TOTAL DDIT. FEE | | • • | OR | TOTAL IDDIT. FEE | | | | |
| | | (Column 1) | | (Colum | n 2) | (Column 3) | | | | • | ·, • | A4. v. 4. eme | • | | | |
| ပ | • | CLAIMS REMAINING | • | HIGHE | | PRESENT | Г | · | T | ADDI- | f | | ADDI- | | | |
| AMENDMENT C | | AFTER AMENDMENT | _ | PREVIOL PAID FI | JSLY | EXTRA | l | RATE | TI | ONAL FEE | | RATE | TIONAL | | | |
| | Total | • | Minus | 44 | | 8 | | X\$ 9» | T | | OR | X\$18= | | | | |
| 3 | Independent | • | Minus | *** | | - | F | X43= | T | | | X86= | | | | |
| | FIRST PRESE | NTATION OF MU | LTIPLE DE | PENDENT (| MIALC | | · - | | - | | OR | | | | | |
| • 11 | If the entry in column 1 is less than the entry in column 2, with "O" in column 2. | | | | | | | +145= | L | | OR | +290- | | | | |
| | the "Highest Nur the "Highest Nu | nber Proviously Pa mber Proviously Pa | d For IN THIS id For IN THI | S SPACE is to S SPACE is t | ess then | 20, enter "20." | | TOTAL OIT, FEE | L | | | DOTAL DOT. FEE | | | | |
| 1 | he Highest Num | ber Previously Pak | For (Total or | Independen | () is the | highest number | found | in the ap | proj | priatė bax | jù copr | ms 1. | 1 | | | |

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

| 10+6+1.4 | | | | | | | | | | | | |
|---|---|---|-------------|------------------------------------|---------|------------------|-------------------|------------|--|----------------|----------------|------------------------|
| CLAIMS AS FILED - PART (Column 1) | | | | | | | SMALL ENTITY TYPE | | OR | OTHER SMALL | THAN ENTITY | |
| TOTAL CLAIMS | | 39 | 39 . | | | | RATE | . FEE | 7 | RATE | FEE | |
| FOR | | | NUMBER | NUMBER FILED | | NUMBER EXTRA | | BASIC FE | E 385.00 | OR | BASIC FEE | 770.00 |
| T | TAL CHARGE | ABLE CLAIMS | 39 m | 39 minus 20= | | . 19 | | X\$ 9= | 171 | OR | X\$18= | |
| IN | DEPENDENT C | LAIMS | 4 11 | ninus 3 = | 1 | | | X43= | 43 | OR | X86= | |
| M | JLTIPLE DEPE | NDENT CLAIM P | RESENT | | | | | +145= | | | +290= | · |
| * If the difference in column 1 is less | | | | s than zero, enter "0" in column 2 | | | | TOTAL | 599 | OR OR | TOTAL | |
| • | C | LAIMS AS A | MENDE | D - PAR | T II | | | | <u> </u> | | OTHER | THAN |
| | | (Column 1) | | (Column 2) (Column 3) | | | | SMALL | ENTITY | OR | SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NON | Total | | Minus | ** | | | | X\$ 9= | | OR | X\$18= | |
| ME | Independent | • | Minus | . *** | | . | | X43= | | OR | X86= | · |
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| | • | | • | • | | | · | TOTAL | | 1 | TOTAL | |
| | | (Column 1) | | (Calcum | | (Calema 0) | • | ADDIT. FEE | | JOR , | ADDIT. FEE | |
| | | CLAIMS | T | (Colun | ST | (Column 3) | lr | | ADDI- | 1 1 | | 4001 |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | NUMB PREVIO PAID F | USLY | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | ADDI- TIONAL FEE |
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| | | | | | | | L | TOTAL | | OR A | TOTAL | |
| | | (Column 1) | | (Colum | o: 31 | (Column 3) | , | DOIT. FEE | | | VDDIT. FEE | |
| O | ` | CLAIMS | | HIGHE | ST | | F | | ADDI- | | | 4001 |
| ENT | | REMAINING AFTER AMENDMENT | | PREVIOU PAID F | JSLY | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | * | Minus | 44 | | B . | T | X\$ 9= | | OR | X\$18= | |
| ME | Independent | • | Minus | PWA | | | H | X43= | | | X86= | |
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| | | | | | | | | +145= | | OR | +290= | |
| H | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE | | | | | | | | | | | |
| 7 | The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | |